Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

FILED

US DISTRICT COURT WESTERN DISTRICT United States District Court **OF ARKANSAS** Jul 10, 2018 District of ARKENISES OFFICE OF THE CLERK Division 18-6062 Case No. (to be filled in by the Clerk's Office) Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. Jury Trial: (check one) If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) COMPLAINT FOR A CIVIL CASE I. The Parties to This Complaint A. The Plaintiff(s) Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed. Name Street Address City and County State and Zip Code Telephone Number E-mail Address 241976 OGME

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

Defendant No. 1	2 (\wedge		
Name	City	det	Host	SORINGS

Document 1

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

1110	0 1
Hot Springs	Gazland
ARKENISES	, ,

Defendant No. 2

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Shown Lowey
Lat Copingo Palice Copficer
(041 Malven Le
Hot Springs, Gerland Arkenises 71901
501-321-6789

Defendant No. 3

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Les	Sessi		
Hot	Springs	Police	OATICER
641 1	Melver	J Ave	
Hots	prince	Genle	end
ARKen	Jes	71901	
501-	321-6	789	

Defendant No. 4

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Michael Stone
Hot Spring Holice Officer
641 Malvern Ave
Hist Springe Gerland Arkenises 1901
Arzkenises 71901
501-321-6789

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is	1	is for feal questi	deral court jurisdiction? (check all that apply) ion Diversity of citizenship	
Fill out	the para	igraphs	in this section that apply to this case.	
A.	If the I	Basis for	r Jurisdiction Is a Federal Question	
			c federal statutes, federal treaties, and/or provisions of the United Stathis case.	tes Constitution that
В.	If the I	Basis for	r Jurisdiction Is Diversity of Citizenship	
	1.	The Pla	aintiff(s)	
		a.	If the plaintiff is an individual	
			The plaintiff, (name)	, is a citizen of the
			State of (name)	
		b.	If the plaintiff is a corporation	
			The plaintiff, (name)	, is incorporated
			under the laws of the State of (name)	
			and has its principal place of business in the State of (name)	
			re than one plaintiff is named in the complaint, attach an additional penformation for each additional plaintiff.)	age providing the
	2.	The De	efendant(s)	
		a.	If the defendant is an individual	
			The defendant, (name)	, is a citizen of
			the State of (name)	Or is a citizen of
			(foreign nation)	

Pro Se 1	(Rev. 12/16) Complaint	for a Civil Case
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Ъ.	If the defendant is a corporation	
	The defendant, (name)	, is incorporated under
	the laws of the State of (name)	, and has its
	principal place of business in the State of (name)	
	Or is incorporated under the laws of (foreign nation,	
	and has its principal place of business in (name)	
	more than one defendant is named in the complaint, at ne information for each additional defendant.)	tach an additional page providing the
		tach an additional page providing the
Sam		
sam The	e Amount in Controversy	as the defendant owes or the amount at
sam The	e amount in controversy—the amount the plaintiff claim	as the defendant owes or the amount at

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

"See Atteched"

IV. Relief

arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. I am acking from punitive money damages. I am acking from punitive damages in the amount of \$100 claims you are entitled to actual or punitive money damages. I am acking from punitive money damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Include any punitive money damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Include any punitive money damages. Include an

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal

Document 1

Pro Se 1	(Rev.	12/16)	Complaint	for	a	Civil	Case

V. Certification and Closing

В.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: Fei July 6, 2018
Signature of Plaintiff Printed Name of Plaintiff Enric Shaw
For Attorneys
Date of signing:
Signature of Attorney
Printed Name of Attorney
Bar Number
Name of Law Firm
Street Address
State and Zip Code
Telephone Number
E-mail Address

OU 4 Case 6:18-cv-04062-PKH Document Filed 07/10/18 Page 6 of 23 Page 10/10/18 ith a 20 yr old motorcyclist Name Matter Tadlock. I iles extremly distrought by the site of Me tadlock bleeding and unconscience, but immediatly went to oid Me Tedlock with worther temple witness and all as the operator gave us introctions in CPR, until peremedics erreived. Officer Shown Lowrey began intorveiwing witness's we by the want of David Shew who \$ interduced his self TO me at the scene along with a gentle men he was with receeded to tell officer Laurey that the accendent was not my fault. Mr Laurey's supieur officer they told im very loudly "Go Get those witness's Nemes". Still there are no witness's on there statements in report. 18im#1 Denied Deve process Officer Lowery did delibertly and eliously not list witness's on report because there testomony 125 in We. Show's Auror.) I was distraught over the death of Mr tadlock as pore-idics notified me he was deceased. Officer howevery took me not it was not my fault and that I had did nothing warm. new told me to still the back of a petrol con so idn't have to look at the scene and that he would have he door open and I did nothing wrong Suddenly the door was stammed and locked. (Claim#2 Else Imprisonment Officers Lowren and Stone locked e in the beek of petrol cer with no probable cause or istification. No criminal Change.) Officers proceeded to hit he lock button around 3 times as a form of mental abuse. Africar stone than told me that I could volentarly give blood sample or he would get a weerent.

I weason the coolege the popular the ortigle broather propelle to CHI ST VINCENT HOSPITAL were I was excepted to the E.R. by officer stare and his famale pretner. Officer Stone then told E.R. Stelff that I was here to volcute give a blood sample. I said I'm not here volentarly I went to go pray at the crash site for Mr tadlock and his family. Immediatly hand also were placed on my by officer Stone. (Claim 3 Denied Freedom of Religion - e saw as I said I wented to go pray hand also were placed on me up p.c. no charge.)

Officer Stone than told me if I gave up my blood he would take off the also. When he removed them I

Officer Stone then told me it I gave up my blood he would take off the wifes. When he removed them I tried to leave my path was blocked my officer stone and his female partner. She (stone's partner) then dialed as number on her cell phone (not dispect redio) isk what do we do he what's to leave's she hung up the cell phone and told Stone appears him for driving on suspended. Hendalfs were now placed on me again.

I weited 40 mins untill Det. Les Jessup errived with a take search weerant for my blood (Claim#4 Folse Sweazing - officers toied to enforce them will upon me and medical staff with a felse seeed wereaut)

Nurse would not proceed without my conscent her was coenced by Officers Jessup, stone, and female officere Nurse and E.K. Staff That I was a "Scumber" (claim the Humilation - Nurse said the does not core about that a and the said No as well.

I Castela 28-20-06082 PKIN Dolumen De Ckilled 10718 + Page 8-0533 Page ID #-814 I parking lot for about 15 more mins and was transported to National Perk Med. Center 10 miles away were I was dragged out of the cor slammed down on the concrete with hender As on. (cleim # 6 Excessive Force - by les jescup put into wheelcheir and push into ER. at NPMC were agein I refused and the medical state refused. I was then temported to Gerland Co Det. Centre were officer stone wrote me a cietion for Driving on Suspended ON 4-20-18 at 1:13 em two hours after the Acc (Cleim#M Emotional Distress - the events of this tresic night with police excessive force, violeta my civil and Constituional Rights to the point I em effired of the HSP.D. and what they may do to me. I lost my truck my father gave to me on his death bed in Nov 2017 he di in Feb 2018. It was haved Aron the scene I could not affect to get it out and witness's we purposley left off report to kept me Aronn Ailing insurance claim, but more importantly Ma Tadlock and his family and what they went three and I went threw this kind of personal forelle is 3 Misconduct 3 Melious Reckless dileberal and I is hes given me mouth 1 a.

DASCRo	DEF.#
OT SPRINGS POLICE DEPT.)	No. 375411
SS.	140. 373411
OT SPRINGS, AR 71901	SUMMONS .
HE UNDERSIGNED, BEING DULY SWORN, UP	
ON THE DAY OF	F // 20 / AT // P.M.
NAME Show!	FIRST M.L.
STREET _ \$10 Alckins	FIRST M.L.
CITY AND STATE HIS Survey	Mic 11413 HM PHONE: Kills and
AGE 2D.O.B. Way RACE	6/ SEX 1/HT: WT: 150
LIC. No. 767741 567 1) 'NUMBER CLASS	CDL (PARK ST DID UNLAWFULLY (OPERATE
	EJN MAKE COLOR S. her
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
UPON A PUBLIC HWY., NAMELY AT (L	OCATION) Citted Lines
EMPLOYED BY:	PHONE:
	FORESAID AND DID THEN AND THERE
COMMIT THE FOLLOWING OFFENSE	C(S)
SPEEDING (OVER LIMIT) □0-10 MPH □11-20 (MPH IN	MPH □21-25 MPH □26 & OVER MPH MPH ZONE) 27-51-201 □ FAILURE TO YIELD 27-51-503
☐ CARELESS / PROHIBITED DRIVING	☐ FAILURE TO YIELD
27-51-104 ☐ DISOBEYED TRAFFIC SIGNAL	27-51-503 CHILD SAFETY SEAT
27-52-107 DISOBEYED STOP/YIELD SIGN	27-34-104 IMPROPER TURN
27-51-601	27-51-401
☐ FAIL TO YIELD TO PEDESTRIAN 27-51-1202	☐ IMPROPER LANE CHANGE, 27-51-302
☐ FOLLOWING TOO CLOSELY	☐ EXPIRED / NO VEH LIC. 27-14-304
27-51-305 □D DRIVING ON SUSP / REVOKED-D:E.	☐ EXPIRED / NO D.L.
27-16-303 ☐ NO PROOF OF LIABILITY INS.	27-16-602 D.W.1.
27-22-104	5-65-103
☐ NO OR IMPROPER SEAT BELT 27-37-702	REFUSAL TO SUBMIT 5-65-205
YES NO ACCIDENT D COMMERCIAL VE	YES NO YES NO I
OTHER OFFENSE(S) (SPECIFY STATUTE	NUMBER / COMMENT(S)
	\alpha
COURT APPEARANCE D	AY OF Mary 20. 18
in I / / I was mile become	DURT, 607 QUACHITA, RM 150.
I PROMISE TO APPEAR IN SAID COUF	
SIGNATURE 77 17 17 17 17 17 17 17 17 17 17 17 17	ES THAT HE HAS JUST AND E AND DOES BELIEVE THAT
ATA.M./P.M. DISTRICT CO I PROMISE TO APPEAR IN SAID COUR SIGNATURE THE UNDERSIGNED FURTHER STATE REASONABLE GROUNDS TO BELIEVI THE PERSON NAMED ABOVE COMMI FORTH, CONTRARY TO THE LAW SW	ES THAT HE HAS JUST AND E AND DOES BELIEVE THAT
SIGNATURE 77 17 17 17 17 17 17 17 17 17 17 17 17	ES THAT HE HAS JUST AND E AND DOES BELIEVE THAT ITTED THE OFFENSE HEREIN SET ORN TO AND SUBSCRIBED BEFORE ME.
I PROMISE TO APPEAR IN SAID COUR SIGNATURE 7 THE UNDERSIGNED FURTHER STATE REASONABLE GROUNDS TO BELIEVI THE PERSON NAMED ABOVE COMMI FORTH, CONTRARY TO THE LAW SW	ES THAT HE HAS JUST AND E AND DOES BELIEVE THAT

Case 6:18-cv-06062-PKH Document 1 Filed 07/10/18 Page 10 of 23 PageID #: 10

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Brivers' Las	Names SH	AW, TADLOCK							1961	Page 1	of 12
Juvenile Invo	lved Ye	S No ARKA	NSA	S MOTOR VE	HICLE	CF	RASH REP	ORT Sev	erity Fa	atality Injury	PDO
# of Motor Vehicles	. 2	_		Rev. 2			Crash Report #				
Automobiles, Motorcycles, e.	tc.		_				Crash Report	TOLUTTIO			
# of Non-Motorists Pedestrians, Bicyclists, etc.	0	Investigating Agence	у НО	T SPRINGS PD	2000						
	OFC	Lowrey	S	hawn			133	Signatur	ne	_	
Investigating Office	Rank	Last		irst	Midd	lle	Suffix Badge	#			
				CRASH DAT	FAND	TIME	=1		10.00		
Date of Crash (MM/E	norm Tit	me of Crash (HH:MM A	M/PM)	Date Police Notifie			2000	Date Police A	Arrived	Time Police Arr	ived
04/20/2018		11:10 PM		04/20/2018	.		1:11 PM	04/20	22.5	11:12 PI	
04/20/2018		11.10 FW					I. I I FWI	04/20	12010	11.12 PI	VI
				CRASH L	OCATIO	To be seen as a				2.	
County		City				48.53	tude		Longitude		
Garland	it.	Hot Springs					05448° N		93.055090	J. AA	
Road/Street/Highwa	У			20 C C C C C C C C C C C C C C C C C C C	Log Mile		At Intersec				
7 (7)				090	10.4	431 .	ORANGE S	1			
Not in City, but				of the City	Limits of	5					
	ance (feet or mile	es to two decimal places) D	irection (N/S/E/W)		City	S (311)				
Not at Intersection,	brit			0	f						
Not at intersection,	-	e (feet or miles to two decimal p	laces)	Direction (N/S/E/W)	Referen	ce poin	<u> </u>				
S.				ASH FACTORS		THE REAL PROPERTY.					
First Harmful Event	205	Location of First	100	School Bus	000	THE OWNER OF THE OWNER, WHEN	way Surface	100	Weather Cor	nditions	
₹ 100 Overturn/rollover		Harmful Event		Related		21.5	lition		Check all that app	dy:	
100 Overturn/rollover 101 Fire/explosion 102 Immersion, full or pa	artial	100 On roadway 101 Shoulder		000 No, school bus not involved		100 Dr 101 We			100 Clear		
103 Jackknife	aiuai	102 Median		100 Yes, school bus		102 Sn	IOW		101 Cloudy	108 Freezing r	ain or
104 Cargorequipment to		103 Roadside 104 Gore		directly involved 101 Yes, school bus		103 Sh	ush e or frost	ģ	102 Fog	freezing d	rizzle
113 Fell/jumped from me 115 Object thrown or fal		105 Separator		indirectly involved			ater (standing or mov	ing)	☐ 103 Smog	□ 109 Snow	
on or near motor ve		106 In parking lane or zone	Lacronian C	Type of	100	106 Sa			104 Smoke	110 Blowing si	
198 Other non-collison		107 Off roadway, location unl 108 Outside right-of-way (traf		Intersection 000 Not an intersection	-	107 MI	ud, dirt, or gravel		☐ 105 Rain	111 Severe cro	
200 Pedestrian 201 Pedalcycle	*	999 Unknown		100 Four-way intersection		198 Ot			106 Sleet	112 Blowing sa soil, or dirt	
9 202 Other non-motorist		Type of Collision	202	101 T-Intersection				See - Married See	107 Hail -		
	in, engine)	100 Single vehicle crash 200 Front to rear		102 Y-intersection 103 L-intersection		_	known		☐ 198 Other		3
205 Motor vehicle in tran		201 Front to front		104 Traffic circle	9	100 Da	Condition	103			- COL 10
출 206 Parked motor vehicl 중 207 Falling/shifting carg		202 Angle 203 Sideswipe, same direction	n	105 Roundabout 106 Five-point or more		101 Da		29	999 Unknown	E.	
o set in motion by mo	tor vehicle	204 Sideswipe, opposite direct		999 Unknown		102 Du			Roadway Co		
208 Work zone/mainten 298 Other non-fixed obje		205 Rear to side 206 Rear to rear		Road System	102		ark - lighted ark - not lighted		Check all that app	dy:	
		980 Other (describe below)		100 Interstate 101 US highway	-		erk - unknown lighting		☑ 000 None	2010 2010 020	
301 Bridge overhead str				102 State highway		198 Ot	ner		=	due to prior crash	
S 302 Bridge pier or suppo ≤ 303 Bridge rail	ort	Relation to	100	103 County road		999 Un	known	_	101 Backup o	due to prior uning incident	
E 0010 11 1 - 1		Junction L 000 Non-junction		104 City street 105 Frontage road		Envir	ronmental Fact	ors	102 Backup o		
305 Culvert		100 Intersection		106 Ramp		Check	all that apply: 0 None		congesti		
₽ 307 Ditch		101 Intersection related		999 Unknown	_	T 10	0 Weather conditions		103 Toll boot		
304 Cable barner 305 Culvert 306 Curb 307 Ditch 308 Embankment		102 Entrance or exit ramp 103 Entrance or exit ramp rela	ated	Property Classification	100		1 Visual obstructions		104 Road sur (wet, icv.	rrace condition , snow, slush, etc.)	
309 Guardrail face 310 Guardrail end		104 Railway grade crossing		100 Public property			2 Glare	7	105 Debris	,	
311 Concrete traffic barr	ier	105 Crossover related 106 Driveway access		101 Private property		103	3 Animals in roadway	· .	106 Ruts, hol		
312 Other traffic barrier 313 Tree (standing)		107 Driveway access related				19	8 Other:		107 Work zor		
314 Utility pole/light sup	port	108 Shared-use path or trail 109 Acceleration or decelerat	ion lane						THE RESERVE OF THE PARTY OF THE	evel-polished surface	
315 Traffic sign support		110 Through roadway	Juli Ialic			999	9 Unknown		109 Obstructi		
316 Traffic signal suppo 317 Other post, pole, or		198 Other location within an interchange area		Trafficway Classific	cation			100	110 Traffic co	introl device ve, missing, or obscure	ed
318 Fence		(median, shoulder, and ro	oadside)	100 Trafficway, on road 101 Trafficway, not on road	d		V		A CHARLES AND AND AND AND ADDRESS.	s (none, low, soft, high	639
319 Mailbox 320 Building .	7			102 Non-trafficway (descri			5		112 Non-high	way work	ā: 0
398 Other fixed object		999 Unknown							☐ 198 Other:		
999 Unknown	7.5										
If 198, 298, or 398, describe:			12.7 (2)			-	- VS-		999 Unknown	1	
			W	ORK ZONE CRAS	SH INFO	ORM	ATION				4.5
Work Zone 000	Location Re		Worl	к Zone Туре	9	70	Worker(s) Pres	ent 970	Law Enforc	ement Present	970
000 No	to Work Zon	ne first work zone warning sign		ane closure	-		000 No			proement presence	
100 Yes 999 Unknown	101 Advance wa			ne shift or crossover ork on shoulder or median			100 Yes 970 Not applicable		100 Officer pres 101 Law enforce	ent ement vehicle only pre	sent
	102 Transition a	area	103 In	termittent or moving work			999 Unknown		970 Not applical		2000 20
2	103 Activity area 104 Termination		198 O	ner					999 Unknown		3
	970 Not applica		970 N	ot applicable							
	999 Unknown			nknown	A455) No. 100			4	_

Filed 07/10/18 Page 11 of 23 PageID #: 11 533464 Case 6:18-cv-06062-PKH Document 1 Page 2 of* 12 Crash Report # 18L011716 ATTACHMENTS Photos Taken Description Yes Type ₩ No 3 NON-VEHICULAR PROPERTY DAMAGE Address **Description of Property Damage** State Postal Code WITNESSES' CONTACT INFORMATION Postal Code State Address City Last Name First Name Middle Name

CRASH SPORE ARAS MENISTROPERTY DAMESTALL

Motor-Vehicle #	AR	KANSAS MO	TOR VEHICL	E CRASH	REPORT	Page 3 of	f 12
		VEH	IICLE INFORM	TATION	Crash Report #	# 18L011716	
		DESCRI	PTION AND IDEN	TIFICATION			
Check if this vehicle had no driver				000	Vehicle Body Type		109
001 No, vehic	ot leave the scene de & driver left the scene driver left the scene		chicle & driver left the scene aly driver left the scene		Passenger Vehicles 100 2-door	*	
VIN 1GKEC13R9XJ783468	arret leit tile decile	· · ·			101 4-door 102 Hatchback		
Vehicle-Year, Make, and Moo	del				103 Convertible 104 Station wagon		
1999 GMC		Full-size	Jimmy/Yukon		105 Pick-up		
Year Make License Plate		Model			106 Mini-van 107 Passenger van (seats any nun	nber if personal; up to 8 if b	usiness)
IN WUN409		2018	Missing	M25 - 2000 A150	108 Cargo van (10,000 lbs or less) 109 Sport utility vehicle		
State Number		Year	Unknown (fill in	all known details)	110 Large utility vehicle		
Trailer #1 License Plate			■ Missing		111 Motor home/recreational vehicle 198 Other passenger vehicle	de	
State Number			Unknown (fill in	all known details)	Truck (> 10,000 lbs)	*	
Trailer #2 License Plate			Missing		200 Single unit truck (2 axles) 201 Single unit truck (3 or more ax	des)	*
22.70			Unknown (fill in	all known details)	202 Single unit truck with trailer	100)	
Owner Name Same as dr	iver Unknown				203 Truck tractor only (bobtail) 204 Tractor/semi-trailer		
ROBERT LISHAW					205 Tractor/doubles 206 Construction/maintenance equ	uinment .	
Owner Address Same as dri	iver Unknown				207 Farm equipment		
210 NICKENS ST		IOT SPRINGS NA	AR	71913	298 Other heavy vehicle (GVWR/G Bus / Van / Limo (9 or more seats		
Motor Carrier Type 00	00 Motor Carrier ID	Numbers	State	Postal Code	300 School bus		
000 Personal transportation	USDOT#				301 Transit/city bus 302 Motor coach/intercity/cross-co	ountry bus	
100 Interstate carrier 101 Intrastate carrier	MC/MX#			7	303 Limousine 304 Van (seats 9-15, including driv	- E	
102 Not in commerce - government 103 Not in commerce - other truck					390 Other vehicle (seats 9-15, incli	luding driver)	
999 Unknown	State #		Sta	ite	391 Other vehicle (seats 16 or mor Cycle / Low Speed	re, including driver)	
Motor Carrier Name U	nknown				400 Motorcycle		
(4)				*	401 Motor scooter 402 Moped		
Motor Carrier Address U	nknown				403 ATV (3, 4, or 6 wheels) 404 Snowmobile		
					405 Golf cart		
Street Cargo Body Type		ity	State	Postal Code	406 Low speed vehicle 498 Other motorized cycle/low spe	ed vehicle	
000 No cargo body 104 Cargo	tank	109 Dump	198 Other	000	Unknown		
100 Bus 105 Log 101 Van / enclosed box 106 Intern	nodal container chassis	110 Concrete mixer 111 Auto transporter	1922		999 Unknown type of motor vehicle If 198, 298, 390, 391, or 498, describ		
102 Grain / chips / gravel 107 Vehic	le towing another vehicle	112 Garbage / refuse	999 Unknown		11 190, 290, 390, 391, 01 490, describ	e below.	
103 Pole trailer 108 Flatbe	ed Hazardous Materials	Discord	Usesandana Matarial I		N	-t-i-l- D-li	
100 10,000 lbs or less	000 Placard not required	000	Hazardous Material I (4-digit # or name from middle of diamond or rectangular box			aterials Released Cargo Compartment	970
101 10,001 - 26,000 lbs 102 More than 26,000 lbs	100 Placard displayed 200 Placard required but r	2007 100 100	Hazardous Material (us materials not released ous materials released	
970 Not applicable	999 Unknown		(1-digit # from bottom of diamond)			le (not carrying hazardous m	naterials)
INSURAN	CE			DA	MAGE		
Insurance		Damage Severity	101	100000000000000000000000000000000000000	Contact Point	Damaged Areas	
Uninsured at time of crash	(fill in any known details)	000 No damage 100 Minor damage		7 8	(check 1)	7 8 9 10	
Insurance Company		101 Functional damag					11
Carlotte Constitution of the Constitution of t	miline il	999 Unknown		6 🗖	12 6		12
NAIC#		Damage Estimate	e \$4,000	5 4		7 7 9 9 9 9 9 9 9 9 9 9	
		Damage Prior to		□ 000 Non		097 No damage	1
		▼ No prior damage		100 Car	10 march 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	113 Top	
Policy #		Yes (describe be	low)	☐ 113 Top		114 Undercarriage	
				☐ 114 Und ☐ 999 Unk	ercamage	999 Unknown	
			TOWNS	1 999 OUK		555 OHMIOWII	-16-2
Towed 10	Towed By	-5	TOWING	-0.6	- 75		
000 Not towed	Xtreme Towing a	nd Recovery					
100 Towed, but not due to disabling dan 101 Towed due to disabling damage	Towed To			COMPANIES AND		2 79	
386	110 Technology I	Place		Hot Springs	AR	71901	
	Street			City	- State	Postal Code	

Motor Vehicle #	AR	KANSAS	MOTOR VEH	ICLE C	RASH REPORT	Page	4 of 1 12
11	72 55		VEHICLE INFO	ORMAT	ION	Crash Report # 18L011716	
		М	OTOR VEHICLE C	IRCUMST	ANCES		
Vehicle Usage 000 000 No special function 100 Taxi 101 School bus/school transport 102 Church bus 103 Transit/commuter bus 104 Intercity bus 105 Charter/four bus 105 Shuttle bus 107 Military 108 Police 109 Ambulance 110 Fire truck 111 Non-transport emergency services vehice 112 Incident response 999 Unknown Vehicle Defects Check all that apply. ✓ 000 None	100 Non-eme 101 Non-eme 102 Emerger 103 Emerger 970 Not appl 999 Unknown Travel Dir 100 Northbot 101 Southbot 102 Eastbou	y Vehicle Us rgency, non-tra rgency transpor cy operation, er cable action and and and and and and and and and an	OTOR VEHICLE C sage nsport	970	Vehicle Maneuver 100 Movement essentially state of each traffic Control Device the konext to each traction of the control device that was presented to the right to status of each traffic control device the right to status of each traffic control device the right to status of each traffic control of the contr	Types and Statuses iffic 100 Functioning properly 101 Functioning improperence of the 102 Inoperative or missin	106
	Turn signals		111 Windows or windshi	eld	present.		Democratical Control
	3 Wipers	9	114 Truck coupling, trail		Fraffic Cor Chec	trol Device Type	Use above codes
☐ 115 Fuel system ☐ 116	Cruise control		hitch, or safety chair	ns	☐ 000 None		P. C. Carlon
☐ 198 Other					☐ 100 Flashing traffic cont	rol signal	
					☐ 101 Traffic control signa		
999 Unknown					☐ 102 Stop sign		
Trafficway Description	200	Roadway S	urface	101	☐ 103 Yield sign		,
100 One-way trafficway	200	100 Concrete	unase	101	104 Slow or warning sig	n	
200 Two-way, not divided	loft turn long	101 Asphalt 102 Gravel			105 Person (officer, flag		
201 Two-way, not divided, with a continuous 300 Two-way, divided; unprotected (painted)		103 Dirt					
400 Two-way, divided, positive cable barrier	1	198 Other	11 1		106 School zone sign/de	WICE	-15.17
401 Two-way, divided, positive concrete barri 498 Two-way, divided, other type of positive I		000 Hilmann			107 Pedestrian signal		
*		999 Uriknown			☐ 108 No passing signal		
999 Unknown					☐ 109 Words or symbols p	ainted on roadway	
Roadway Grade	100	Roadway A	lignment	100			100
100 Level 999 Unknown 101 Hillcrest		100 Straight 200 Curve left			☐ 111 Railway crossing wi	th gate and signals	
102 Uphill		201 Curve righ			☐ 112 Railway crossing wi	th flashing signals only	
103 Downhill 104 Sag (bottom)		1299 Curve, dire 1999 Unknown	ection unknown		113 Railway crossing wi	th crossbuck only	
Total # of Lanes		Posted Spe	ed Limit		198 Other:		
Total # of Lanes	3	Use the posted	speed limit that applied	30	999 Unknown		
	-	to this vehicle at	the time of the crash.	LE EVEN			
			MOTOR VEHIC	LE EVEN			
Sequence of Events 1 205 Most Harmful Event 205	2	3	4 5		6 7] 8 9	10
Non-Collision			-Fixed Object	Collis	ion with Fixed Object		Unknown
100 Overturn/rollover 101 Fire/explosion	200 Ped 201 Ped				pact attenuator/crash cushion dge overhead structure	318 Fence 319 Mailbox	999 Unknown
102 Immersion, full or partial	202 Oth	er non-motorist		302 Brid	dge pier or support	320 Building	
103 Jackknife 104 Cargo/equipment loss or shift		way vehicle (tra nal (live)	in, engine)	303 Brid 304 Cal	dge rail ble barrier	398 Other fixed object	
105 Equipment failure	205 Mot	or vehicle in trai		305 Cul	lvert	If 198, 298, or 398 is used, descri	ibe below:
(blown tire, brake failure, etc.) 106 Separation of units		ked motor vehic ing/shifting carg		306 Cur 307 Dito		*	
107 Ran off roadway right			on by motor vehicle		bankment		
108 Ran off roadway left			ance equipment		ardrail face		
109 Deliberately crossed median 110 Unintentionally crossed median	298 Otn	er non-fixed obj	ect	1. 1274 13.00 13.00	ardrail end ncrete traffic barrier		
111 Crossed centerline				312 Oth	ner traffic barrier		
112 Downhill runaway 113 Fell/jumped from motor vehicle					ee (standing)		
113 Feli/jumped from motor venicle 114 Reentering roadway					lity pole/light support affic sign support		
115 Object thrown or fallen on or near motor	vehicle			316 Tra	offic signal support		
198 Other non-collison				317 Oth	ner post, pole, or support		

Case 6:18-cv-06062-PKH Document 1 Filed 07/10/18 Page 14 of 23 PageID #: 14 533464

Motor Vehicle #	7	AR	KAN	SASI	MOTOF	VEHICLE CR	ASH REF	ORT			Page	5	of 12
111]			I	DRIVER	RINFORMATIC	N	(Crash Re	eport#	18L01171	6	272
		9 9			DRIVE	R INFORMATION	L						
Name Unknown							Date of Bir	th/Age S	Sex 🗹		Race		100
SHAW	EF	RIC					03/24/1 Age:	2000		Female Jnknown	100 White/ 101 Black/		
Address Unknown	Fin	it .		N	liddle	Suffix	Age.	42		JIN IOWII	102 Hispan 103 Asian/F	ic	
					OT SPRIN	IGS NA	AR	71913			104 Americ		
210 NICKENS ST Street					ity	100 NA	State	Postal C			198 Other 999 Unknow	wn	
Sirect						ENSE INFORMA	The second secon	7 00107 0		100	CCC OTHER		
License Status 200	License N	umber				Restrictions on Lice	nse Check all	that apply.	Restrict	ions Vio	lated	Check a	all that apply.
000 Not licensed 100 Valid license	1	902	746301	*		☑ 000 None			₩ 000 N	one			
200 Suspended	License St	ate	Licer	se Clas	S	100 With licensed adul	t	1,600	☐ 100 W	/ith license	d adult		
201 Revoked 202 Expired		AR		D		101 Corrective lenses			□ 101 C	orrective le	nses		1.4
203 Cancelled or denied 204 Disqualified	Is Comme	rcial Driver	License	?		☐ 102 Mechanical aid			☐ 102 M	echanical a	aid		
999 Unknown	Yes	₽No		Sa		☐ 103 Prosthetic aid			☐ 103 Pr	rosthetic air	d		
Endorsements on Licens Check all that apply.	se	Endorsem Check all that a	ents Vic	lated		☐ 104 Automatic transmis	ssion		□ 104 At	utomatic tra	ensmission		
☑ 000 None		☑ 000 None				☐ 105 Outside mirror	5-37300		☐ 105 O	utside mim	or		
100 Double/triple trailers		☐ 100 Doub		ailers	-	☐ 106 Daylight only			☐ 106 D	aylight only			
☐ 101 Passenger		101 Passe	enger		-	107 Class B or C with	passengers and o	lass D	☐ 107 C	lass B or C	with passer	igers and	class D
☐ 102 Tank vehicle	V 200	☐ 102 Tank	vehicle		201	108 Class C only with			☐ 108 C	lass C only	with passer	ngers	
103 Hazardous materials		☐ 103 Haza	rdous mat	erials		☐ 109 Vehicles without a	irbrakes		☐ 109 V	ehicles with	nout airbrake	as	1.2.0
104 Tank vehicle & hazardou	us materials	☐ 104 Tank	vehicle &	hazardous	materials	110 Interlock device			☐ 110 ln	terlock dev	rice		
☐ 105 School		105 School	ol			111 School, church, or	transit bus		☐111 S	chool, chur	ch, or transi	t bus	
106 Motorcycle		☐ 106 Motor	cycle			112 Class D only with	passengers		☐ 112 C	lass D only	with passer	ngers	
107 Motor driven cycle		107 Motor	driven cy	cle		113 Diesel fuel, fertilize	er only		☐ 113 D	iesel fuel, f	ertilizer only		
☐ 108 Valid without photo		☐ 108 Valid	without ph	noto		114 Seasonal farm ser	vice vehicle		☐ 114 S	easonal far	m service ve	hicle	
☐ 198 Other (describe below)		☐ 198 Other	(describe	below)	70.0	☐ 198 Other (describe be	elow)	-	☐ 198 O	ther (descr	ibe below)		
													1025
	6.												
¥												.01	
			DRI	VER S		AND SAFETY INF	ORMATIO	N					
Seating Position				110	1	Systems Used sed - motor vehicle occupan		L	1	Motorcyc 100 No helr	le Helme	Usage	000
Standard Vehicle Seats	Other	Seating Po	sitions		100 Shoulde	er and lap belt used	ı			100 DOT-∞	ompliant		
Front		eper section o		:k)	101 Shoulde 102 Lap belt	er belt only used t only used			1		ycle helmet v OT-complian		
	802 En	ssenger sectio closed passen		area	103 Restrain	nt used - type unknown straint system - forward faci	na.			motorc	ycle helmet v	wom	
	2015	enclosed pass ssenger/cargo		go area	105 Child re	straint system - rear facing	ing .	65		unknov	m if DOT-co		
	uni	known if enclose			106 Booster 107 Child re	seat straint - type unknown			-		on if helmet ection Us		
	906 Pir	iling unit ling on motor v	rehicle ext	erior	198 Other	, , , , , , , , , , , , , , , , , , ,				Yes	ection os	age	
	480 Unkn	own			970 Not app	licable				₩ No			
5 510 520 530	580 999 Un	known			999 Unknow					Unkno	1		
					200000 000	Deployed		Ejection 000 Not ej	- 1	000	Extricatio 000 Not extri		000
Bus Seating Position				L	Check all th			100 Ejecte	ed, partially	/	100 Extricate	ed	
(Complete if 801 was selected for	Seating Position Front	above.)				eployed: front		101 Ejecte 970 Not a	ed, totally pplicable		999 Unknow	n	
Driver	11011	CV 24.19	29,700 C	A: 30		ployed: side		999 Unkni	own		52.2	20 1	
1A 1B 1C	4-7-5	1D	1E	1F		eployed: curtain eployed: other		Ejection 000 Not e			970 Not app	licable	000
2A 2B 2C 3A 3B 3C		2D 3D	2E 3E	2F 3F	13000	pioyeo, onici		100 Side o	door openi		999 Unknow		
4A 4B 4C		4D	4E	4F		t applicable		101 Side v 102 Winds					
5A 5B 5C	Aisle	5D	5E	5F	□ 999 Un	Known		103 Back	window	ite opening			
				.				105 Roof	opening (s	un roof,			
			:	:				106 Roof	ertible top (convertible	e top up)			
										k of pickup r cut in half			
##A ##B ##C		##D	##E	##F				John	1501, 00	, oot in fidi			

Case 6:18-cv-06062-PKH Document 1 Filed 07/10/18 Page 15 of 23 PageID #: 15

533464

CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

Page | 6 | of 12 ARKANSAS MOTOR VEHICLE CRASH REPORT Motor Vehicle # Crash Report# 18L011716 DRIVER INFORMATION 1. MEDICAL INFORMATION **EMS Notified EMS Arrived** Injury Status Type of Medical Transportation 000 000 Not transported 1 (K) Fatal injury 2 (A) Suspected serious injury 100 EMS air Time Transported to Medical Facility By 101 EMS ground 3 (B) Suspected minor injury 4 (C) Possible injury 102 Law enforcement 198 Other 5 (O) No apparent injury Trauma Band # Medical Facility Transported To 199 Transported, but method unknown 999 Unknown if transported DRIVER CONDITION AND CIRCUMSTANCES Condition at Time of Crash **Driver Distracted By** Driver Vision Obscured By 000 000 000 Not distracted 000 No obstruction noted 106 Not in-transport motor vehicle 000 Apparently normal 100 Manually operating an electronic 100 Rain, snow, fog, smoke, sand, or dust (parked, working) ☐ 100 Physically impaired communication device (texting, typing, dialing) 101 Reflected glare, bright sunlight, 107 Splash or spray of passing vehicle 101 Emotional (depressed, angry, disturbed, etc.) 101 Talking on hands-free electronic device or headlights 108 Inadequate defrost or defog system 102 Curve, hill, or other roadway 102 Talking on hand-held electronic device 109 Inadequate vehicle lighting system ■ 102 III (sick) or fainted 110 Obstruction interior to the vehicle 103 Other activity with an electronic device design feature 103 Asleep or fatigued 103 Building, billboard, or other structure 104 Passenger 111 External mirrors ■ 104 Under the influence of medication or drugs 980 Other distraction inside the vehicle 104 Trees, crops, or vegetation 112 Broken or improperly cleaned windshield 105 Under the influence of alcohol 981 Other distraction outside the vehicle 105 In-transport motor vehicle 113 Obstructing angles on vehicle 198 Other 999 Unknown if distracted (including load) 199 Vision obscured - no details 980 Other visual obstruction (describe below) If 980 or 981, describe below: 999 Unknown **Driver Suspected** Alcohol Test Type Given Alcohol Test Result Status **Blood Alcohol Content** Speeding Related 970 001 000 of Alcohol Usage 000 No test given 100 Results pending 000 Not speeding 100 Racing 001 Test refused 101 Results received Yes 100 Blood test 970 Not applicable 101 Exceeded speed limit 102 Too fast for conditions 101 Breath test 999 Unknown 999 Unknown ☐ No 102 Urine test 198 Other type of test Result received from Crime Lab **Unknown** 999 Unknown if tested **Driver Suspected Drug Test Type Given Drug Test Results** Result received from Crime Lab Citations 001 of Drug Usage Pending/Negative Not Applicable/Unknown Citation # Charges . 000 No test given 001 Test refused 000 Results negative 970 Not applicable Yes 100 Blood test ■ 100 Results pending 999 Unknown 101 Urine test ☐ No 102 Both blood and urine tests Positive Results (check all that apply) 198 Other type of test 200 Amphetamines 206 Methamphetamines ✓ Unknown 201 Barbituates 207 Opiates 999 Unknown if tested 208 Oxycodone 202 Benzodiazepines 209 Propoxyphene ☐ 203 Cannabinoids 204 Cocaine 210 Phencyclidine (PCP) 205 Methadone 298 Other positive result (describe below) DRIVER ACTIONS AT TIME OF CRASH Check all that apply: 999 Unknown ■ 000 No contributing action Disregarded Traffic Signs or Controls Improper Maneuver Other Actions ☐ 300 Improper right turn ☐ 600 Impeding traffic 100 Disregarded red light ☐ 301 Improper left turn ☐ 601 Ran off roadway 101 Disregarded other traffic signal 302 Improper U-turn ☐ 602 Crowded off roadway ■ 102 Disregarded stop sign ■ 103 Disregarded yield sign 303 Improper backing ☐ 603 Crossing median 304 Improper passing 604 Failed to yield right-of-way ■ 104 Disregarded other traffic sign ■ 105 Disregarded other road markings ☐ 305 Improper lane change ☐ 605 Failed to keep in proper lane ☐ 306 Improperly parked 606 Wrong side of road 106 Disregarded officer or flagman ☐ 607 Wrong way Swerved or Avoided Improper Use of Lights or Signals ☐ 608 Followed too closely 400 Driving without lights 200 Swerved or avoided due to wind 609 Cutting in ☐ 401 Failed to dim headlights 201 Swerved or avoided due to slippery surface 610 Over-correcting or over-steering 202 Swerved or avoided due to motor vehicle 402 Failed to or improper signal 980 Other contributing action (describe below) 203 Swerved or avoided due to non-motorist in roadway **Unsafe Operation** ■ 204 Swerved or avoided due to object in roadway ☐ 500 Reckless operation 205 Swerved or avoided due to animal in roadway ☐ 501 Aggressive operation 502 Inattentive, careless, negligent, or erratic operation 503 Under the influence of alcohol ■ 504 Under the influence of drugs

Motor Vehicle	# .	AR	KANSAS I	MOTOR	RVEHICLE	CRA	ASH B	REPORT	122	Page 7	of 12
. 2	:		VI	EHICL	E INFORM	ATIO	N	Cras	h Report# [1	8L011716	
			DESC	RIPTIO	N AND IDENT	TIFICA	TION				
Check if this vehicle	lit and Rur	1					000	Vehicle Body Ty	ne		400
had no driver	300 No, điể no	It leave the scene	100 Yes	s, vehicle & d	friver left the scene	L	000	Passenger Vehicles	TO 100		400
		e & driver left the scene	101 Yes	s, only driver	left the scene			100 2-door			
		Inver left the scene				_		101 4-door			
VIN JYARJ12E16A								102 Hatchback 103 Convertible			
Vehicle Year, Make	8	el						104 Station wagon			
12.00 mg	amaha		R6					105 Pick-up 106 Mini-van			
Year Ma License Plate	ake		Model					107 Passenger van (s	seats any number	if personal; up to	8 if business)
AR 065BY			2019		Missing			108 Cargo van (10,00	0 lbs or less)	51 62.0	- A
State Number			Year	3	Unknown (fill in a	eli known d	fetails)	109 Sport utility vehice 110 Large utility vehice			
Trailer #1 License F	Plate		DAYAN.	conto	Missing			111 Motor home/recre	eational vehicle		
					☐ Unknown (fill in a	all known d	lataile)	198 Other passenger Truck (> 10,000 lbs)	vehicle		
State Number	DI - 1 -				L dikilowii (ilit ili a	SIL KIIDWII U	retails)	200 Single unit truck	(2 ayles)		
Trailer #2 License I	Plate				Missing			201 Single unit truck	3 or more axles)		
					Unknown (fill in a	ali known d	details)	202 Single unit truck	with trailer		
Owner Name	Same as driv	er Unknown						203 Truck tractor only 204 Tractor/semi-trail			
MATTHEW TADLO								205 Tractor/doubles			
Owner Address		er Unknown						206 Construction/mai	ntenance equipme	ent	
154A CLUBHOUSE			OT SPRINGS N	IATIONAL	D AD 7	1901-92	247	207 Farm equipment 298 Other heavy vehi	cle (GVWR/GCW	R > 10,000 lbs)	
Street	OIIV		ity .	MIONAL		ostal Code		Bus / Van / Limo (9 d			
Motor Carrier Type	000				51818	ostal Code		300 School bus	1		
000 Personal transportati	ion —	USDOT#						301 Transit/city bus 302 Motor coach/inter	city/cross-country	bus	
100 Interstate carrier 101 Intrastate carrier		MODEY #			375			303 Limousine			
102 Not in commerce - go	overnment	MC/MX#						304 Van (seats 9-15, 390 Other vehicle (se	including driver)	a delver)	
103 Not in commerce - of 999 Unknown	ther truck	State #			Stat	е		391 Other vehicle (se	ats 16 or more, in	cluding driver)	
Motor Carrier Name	e 🗖 Unk	nown			- 1			Cycle / Low Speed		1966 S 207 P C P C P C P C P C P C P C P C P C P	
		33. 4 3.33.						400 Motorcycle 401 Motor scooter			
		× .		a -			**	402 Moped		*	20
Motor Carrier Addr	ess 🔲 Unk	mown						403 ATV (3, 4, or 6 will 404 Snowmobile	neels)		
								405 Golf cart			
Street		c	ity		State P	ostal Code		406 Low speed vehicl			
Cargo Body Type							000	498 Other motorized of Unknown	cycle/low speed vi	ehicle	
000 No cargo body 100 Bus	104 Cargo t 105 Log	tank	109 Dump 110 Concrete mixe	198 O	ther	_		999 Unknown type of	motor vehicle		
101 Van / enclosed box	106 Intermo	odal container chassis	111 Auto transporte	or —	nknown			If 198, 298, 390, 391, o		low:	
102 Grain / chips / gravel 103 Pole trailer			112 Garbage / refu	se 333 U	IINIOWA				155		
GVWR/GCWR	108 Flatbed	lazardous Materials	Discord	Honord	lous Material ID			10-			
100 10,000 lbs or less		00 Placard not required	Placard 000	(4-digit # /	or name from middle				ardous Mater	go Compartm	970
101 10,001 - 26,000 lbs	1	00 Placard displayed			d or rectangular box)			000 ا	No, hazardous ma	aterials not release	
102 More than 26,000 lbs 970 Not applicable	100	00 Placard required but n 99 Unknown	ot displayed	(1-digit #)		ass			Yes, hazardous m	naterials released of carrying hazardo	oue materiale)
	2 7			bottom of	diamond)				vot applicable (110	Conying nazaroo	ous materials)
	SURANC	E		199				MAGE			er en
Insurance		Unknown	Damage Sever	ity	102			Contact Point check 1)	(0)	Damaged Are neck all that a	as
Uninsured at time of		(fill in any known details)	000 No damage 100 Minor damage			-	7 8		(61		
Insurance Company	у		101 Functional dam	nage				9 10 11		1 1 1 1 1 1	
1	Progressive	,	102 Disabling dama 999 Unknown	age	21	6					☑ 12
	1 1091033140	•	Damage Estima	ate	*	1 1			M	य य य	
NAIC#				\$10,000			5 4	3 2 1	5	4 3 2	1
	16322		Damage Prior t	to the Cra	ish	П	00 Non-c	collision	□ 097	No damage	
	7.4.H.Z.HHH	Takini D	No prior dama	age			00 Cargo		☐113		
Policy #			Yes (describe	below)			13 Top				
9	920212578						14 Under	-	100	Undercarriage	
		1				□ 9	99 Unkno	nwo	999	Unknown	
					TOWING						
Towed	101						-		- 4 (4)		
000 Not towed	lionbline de-	Fox Towing									
100 Towed, but not due to d 101 Towed due to disabling		Towed To									
		618 Fox Pass Cut	off		ŀ	Hot Sprin	ngs		AR 7	1901	
n 1, 1, 261 - 12 1 ² 1 - 1 25		Street		- 1/		City		ODARU DEZOST	State Po	ostal Code	
a face a st spin	* " " " " " " " " " " " " " " " " " " "	ar invalidation of the second	00 0 00 000 100 0 1000	4.00	m's extent to be	1 4		CRASH REPORT - MO	OR VEHICLE DES	JURIPTION AND ID	ENTIFICATION

Case 6:18-cv-06062-PKH Document 1 Filed 07/10/18 Page 17 of 23 PageID #: 17 533464

Motor Vehicle #		AR	KANSA	S MOTOR \	/EHIC	LE CF	RASH			Page [8 of 12
2				VEHICLE	INFOR	RMAT	ION		Crash Report#	18L011716	
	_		D/I	OTOR VEHIC	E CIPO	TOMET	ANCES				
		_			LE CIRC		The second second			90	
Vehicle Usage	000		y Vehicle U	30 7 0		970		Maneuver			100
000 No special function			ergency, non-tra					nent essentially st	raight ahead		-
100 Taxi			ergency transpo			d la una		ating a curve			
101 School bus/school transport				mergency warning ed			102 Backing		48		N.
102 Church bus 103 Transit/commuter bus		970 Not appl		mergency warning ed	quipment in	use	103 Changi	king/passing			
104 Intercity bus		999 Unknow					105 Turning				
105 Charter/tour bus	Ĭ	occ cintion					106 Turning		5.6		
106 Shuttle bus		Travel Dir	nation			1	107 Making	U-turn			
107 Military						101		g traffic lane			
108 Police		100 Northbo				1000	109 Enterin	g traffic lane			
109 Ambulance		101 Southbo 102 Eastbou					110 Slowing			1.72	
110 Fire truck		103 Westboo					111 Parked				
1111 Non-transport emergency service	s vehicle	104 Not on n					112 Stoppe	ed in traffic	058		
112 Incident response		999 Unknow			*		198 Other				
999 Unknown Vehicle Defects Check all that ap	note						-				
Tomore Delicere	эріу.			10			999 Unknow	wn			
☐ 000 None							Traffic C	ontrol Device	Types and Star	tuses	
	74045			- 400 B 1 1				boxnext to each tra		tioning properly	(1)
		naust system		102 Body or door	rs		location of	ice that was presen	at at the 101 Func	tioning imprope	rlγ
	☐ 104 Po			■ 105 Suspension				des to the right to n		erative or missir	
	107 Wh	eels		108 Headlights			status of ea	ach traffic control de	evice 999 Unkn	nown	Ø.
■ 109 Tail lights	110 Tur	n signals		111 Windows or	windshield		present.			- A - A A	Lating the second of
	☐ 113 Wij			114 Truck coupling				Traffic Con	trol Device Typ	ie\	Use above codes.
☐ 115 Fuel system	116 Cn	ise control		hitch, or safe	ety chains		☐ 000 No	ne			Mark and Control of the
☐ 198 Other							☐ 100 Fla	shing traffic contr	ol signal		
Social seguestic pr							☐ 101 Tra	affic control signal			
₩ 999 Unknown	7079						☐ 102 Sto	op sign			
Trafficway Description		200	Roadway S	urface		101	☐ 103 Yie	eld sign			
100 One-way trafficway		200	100 Concrete			101	104 Slo	ow or warning sign			
200 Two-way, not divided 201 Two-way, not divided, with a conti	nuous left f	um lane	101 Asphalt 102 Gravel				=	-	nan, crossing guard	n	
300 Two-way, divided, unprotected (pa	ainted >4 fe		103 Dirt_			· 2a	=	hool zone sign/de			-
400 Two-way, divided, positive cable be 401 Two-way, divided, positive concre			198 Other			*		destrian signal	1100,	122	
498 Two-way, divided, other type of po		er	999 Unknown		-		=				
								passing signal	interest and a second and		
999 Unknown	-	1	Donderny A	lianment		1	_		sinted on roadway		
Roadway Grade 100 Level 999 Unknown		100	Roadway A	mgnment		100		affic lanes marked	<u> </u>	-	100
101 Hillcrest			200 Curve left				☐ 111 Ra	ilway crossing wit	h gate and signals		
102 Uphill 103 Downhill			201 Curve right 299 Curve, dir	ection unknown			☐ 112 Ra	ilway crossing wit	h flashing signals or	nly	
104 Sag (bottom)			999 Unknown				☐ 113 Rai	ilway crossing wit	h crossbuck only		
Total # of Lanes			Posted Spo	ed Limit	63		☐ 198 Oth	her.	2000		
		3	Use the posted to this vehicle a	speed limit that applied t the time of the crash.	d	30	999 Un	known			AST CONTRACTOR
				MOTOR VI	EHICLE	EVEN	TS	1.00	2.5.5	1.5	
Sequence of Events 1 20	5 2	2	3	1 4	. 5		6	7	8	9	10
Sequence of Events 20]	L	
Most Harmful Event 20	5										
Non-Collision		Collis	ion with Nor	-Fixed Object		Collis	ion with F	ixed Object			Unknown
100 Overtum/rollover			destrian					or/crash cushion	318 Fence		999 Unknown
101 Fire/explosion			dalcycle				dge overhead		319 Mailbox		
102 Immersion, full or partial			er non-motorist				dge pier or su		320 Building		
103 Jackknife		203 Rai	lway vehicle (tra	ain, engine)		303 Brid	dge rail		398 Other fixed ob	oject	
104 Cargo/equipment loss or shift			mal (live)				ble barrier				
105 Equipment failure			tor vehicle in tra			305 Cul			If 198, 298, or 39	8 is used, descr	ibe below:
(blown tire, brake failure, etc.)			ked motor vehic			306 Cur					
106 Separation of units			ling/shifting care			307 Dito					
107 Ran off roadway right				ion by motor vehicle			bankment ardrail face				
108 Ran off roadway left 109 Deliberately crossed median			rk zone/mainter ner non-fixed ob	nance equipment			ardrail tace ardrail end				
110 Unintentionally crossed median		298 0(1	ici iiun-iixed ob	CU		115-15-05-17-17-17-1	ardrail end ncrete traffic	harrier			
111 Crossed centerline							er traffic ban			4	
112 Downhill runaway							e (standing)	-			
113 Fell/jumped from motor vehicle						314 Util	ity pole/light				
114 Reentering roadway						315 Tra	ffic sign supp	oort			
115 Object thrown or fallen on or near	motor vehi	cle					ffic signal su				
198 Other non-collison						317 Oth	er post, pole	, or support			*
1.00	-										

Case 6:18-cv-06062-PKH Document 1 Filed 07/10/18 Page 18 of 23 PageID #: 18 533464

, ·Mò	tor Vehi	cle#	7	Α	RKAN	ISAS	MOTOR	R VEHICLE CRA	SH REF				Page _	9 of [12
	2						DRIVE	RINFORMATION	N		Crash F	Report#	18L011716		
							DRIVE	R INFORMATION							
Name	Ur	nknown				(6.16			Date of Bir	rth/Age	Sex 🔽	5 B. 10 C. 10 B. 10 L. 10 L	Race	ACCOMPANIES TO STATE OF THE STATE OF	100
TADLOC	CK		<i>p</i>	MATTHEW		(COLIN		05/27/1 Age:		_	Female Unknown	100 White/Ca		an
Address	TIII I	known	F	irst			Middle	Suffix	Age.	20			102 Hispanic 103 Asian/Pa	cific Islandor	
154A CL						,	HOT SPRIM	IGS NA	AR	71901	í		104 American		
Street	.0011001	00.0111					City	100 101	State	Postal			198 Other 999 Unknown		
250 5.		torior .						CENSE INFORMATI							
License		100	License I	lumber.	*			Restrictions on Licens	se Check al	i that apply.	Restric	ctions Vi	olated	Check all that a	apply.
000 Not lic 100 Valid li			7	9	3400521	4		☑ 000 None			₩ 000	None			
200 Susper	ndeđ		License S	itate	Lice	nse Clas	55	☐ 100 With licensed adult			1 00	With license	ed adult		77.7
201 Revok 202 Expire	d			AR		D		☐ 101 Corrective lenses			101	Corrective le	enses		
203 Cance 204 Disqua		nied		ercial Drive		se?		☐ 102 Mechanical aid			102	Mechanical	aid	- 100	
999 Unkno	nwo		Yes	<u> </u>				103 Prosthetic aid			103	Prosthetic a	id		
Endorse Check all th	ements o at apply.	n Licen	se '	Endorses Check all the	nents V t apply.	iolated		☐ 104 Automatic transmiss	ion		104	Automatic tr	ransmission		
□ 000 No	one			☑ 000 No	ne			☐ 105 Outside mirror			105	Outside min	ror		
☐ 100 Do	ouble/triple	trailers		☐ 100 Dot	ıble/triple t	railers	5.V.+1	☐ 106 Daylight only			106	Daylight onl	у		-
☐ 101 Pa	ssenger			☐ 101 Pas	senger			107 Class B or C with pa	ssengers and	class D	107	Class B or (C with passenge	rs and class	D
☐ 102 Ta	nk vehicle			☐ 102 Tar	k vehicle			☐ 108 Class C only with pa	ssengers		108	Class C onl	y with passenge	ers	
☐ 103 Ha	zardous m	aterials		☐ 103 Haz	ardous m	aterials		☐ 109 Vehicles without airt	rakes		109	Vehicles wi	thout airbrakes		
☐ 104 Ta	nk vehicle	& hazardo	ous materials	☐ 104 Tar	k vehicle	& hazardou	s materials	☐ 110 Interlock device			110	Interlock de	vice		
☐ 105 Sc	hool			☐ 105 Sch	iool			111 School, church, or tr	ansit bus	1	☐111	School, chu	rch, or transit b	us .	
₩ 106 Mc	otorcycle			☐ 106 Mo	orcycle			☐ 112 Class D only with pa	ssengers		112	Class D onl	y with passenge	ers	
107 Mc	otor driven	cycle		☐ 107 Mo	or driven	cycle		113 Diesel fuel, fertilizer	only		113	Diesel fuel,	fertilizer only		
☐ 108 Va	alid without	photo		☐ 108 Val	id without	photo		114 Seasonal farm servi	ce vehicle		114	Seasonal fa	orm service vehi	cle	
☐ 198 Ot	her (descri	be below)		☐ 198 Oth	er (descrit	oe below)	-	☐ 198 Other (describe belo	w)		198	Other (desc	ribe below)		
			2000 F						0.17	,					
											100				
					all color										
					DR	IVER S	AND DESCRIPTION OF THE PARTY OF	AND SAFETY INFO	PRMATIO	N .					
Seating I	Position					110		t Systems Used used - motor vehicle occupant			970	Motorcy 000 No hel	cle Helmet L	Isage 1	100
Standar	rd Vehic	le Seats	Othe	r Seating I	osition	s		er and lap belt used				100 DOT-c			
	Fron			leeper section				er belt only used It only used					cycle helmet wo OT-compliant	n	
		-	802 F	assenger sec nclosed passe			103 Restrai	nt used - type unknown	21			motoro	cycle helmet wo	m -	
	10 120	130		nenclosed pa assenger/car		argo area	105 Child re	estraint system - forward facing estraint system - rear facing	3				wn if DOT-comp		
1	10 220	230	U	nknown if end			106 Booste 107 Child re	r seat estraint - type unknown					wn if helmet wo tection Usag		
	10 320	330	806 5	railing unit iding on moto	r vehicle e	xterior	198 Other	4	**			Yes Yes	iection osag		
-	10 420	430	480 Unk	nown			970 Not app	plicable				□No			
5 5	10 520	530	580 999 L	nknown			999 Unknov	19%		.,		Unkn	own		
							_	Deployed		Ejection 000 Not e		970	Extrication 000 Not extrica		000
Bus Sea	-			et.			Check all th	haf apply: ot deployed		100 Ejecti	ed, partial		100 Extricated	led	
(Complete	if 801 was	selected fo	r Seating Position Front	in above.)			_	eployed: front		101 Ejecte 970 Not a			999 Unknown		
	Driver		I Same	91000	3.55.5e	å- 3-51		eployed: side		999 Unkn	own				
1A	1B	1C		∂ 1D	1E	1F		eployed: curtain eployed: other		Ejection 000 Not e			970 Not applic		970
2A 3A	2B 3B	2C 3C		2D 3D	2E 3E	2F 3F	130 D	opioyed, dulei		100 Side	door oper	ning	999 Unknown	2016	
4A	4B	4C	7 7 2 60	4D	4E	4F		ot applicable		101 Side 102 Wind					?
5A	5B	5C	Aisle	5D	5E	5F	☐ 999 U	nknown		103 Back	window	gate opening	9		
1 220		715								105 Roof	opening ((sun roof,	a		
		:			:			¥2			ertible to (convertil	p down) ·			
				17						198 Other	r (e.g., ba	ck of pickup			
##A	##B	##C		##D	##E	##F		8		tom-	oii 100i, C	ar cut in ha	my		

Motor Vehicle	#	1	AR	KAN	SASI	MOTO	R VEH	ICLE C	RASI	H REPO	DRT			Page 10	of	12
2					I	DRIVE	RINFO	DRMAT	ION		Cra	ash Re	port#	18L011716		
					-			ORMATI			\	70.0		01	4	
Injury Status		Type of Medical	Trancr	ortatio			Notified	OKWATI	ON	92	EMS	Arrived	1	07.0		-
1 (K) Fatal injury		000 Not transported	irans	ortatio	000	04/20/		1	1:11 PM		04/20/		•	11:14 PM		
2 (A) Suspected serious in		00 EMS air				Date	2010		īme	1	Date	2010		Time		
2 (A) Suspected serious in 3 (B) Suspected minor inju 4 (C) Possible injury	iry 1	01 EMS ground					ported to	Medical F	acility B	у		- 6				9 0
4 (C) Possible injury	1	02 Law enforcement													107	
5 (O) No apparent injury		198 Other				B. B. a. ald a	-1 F106	. T							_	-
Trauma Band #	1	199 Transported, but	mathed	unknoum		Iwedic	al Facility	Transpoi	rted 10							
		199 Transported, but 1999 Unknown if trans		unknown			- 21			*						
			000000000000000000000000000000000000000	DE	IVER	CONDI	TION AN	ID CIRC	UMSTA	NCES	7,00		7.5%			i î
Condition at Time o	f Cras	h	Driver	Distrac	2012/06/2015		999			cured By				,	-	980
Check all that apply:			1	distracte		2	999	000 No obs				106 Not	in-transpor	rt motor vehicle	L	900
000 Apparently norma						electronic		100 Rain, si	now, fog, s	moke, sand, o		(par	rked, working	ng)		
100 Physically impaire		nant disturbed ata \	con	nmunicati	on device	(texting, typ	ing, dialing)			right sunlight,				y of passing vehi		1
101 Emotional (depres		ngry, disturbed, etc.)	101 Tal	king on ha	ands-free	electronic de lectronic de	evice	or head		er roadway				frost or defog sy hicle lighting sys		
102 III (sick) or fainted 103 Asleep or fatigued						lectronic de			feature	a roadway				terior to the vehic		
103 Asleep or latigued		adjection or drugs	104 Pas	senger						, or other stru			ternal mirro			
105 Under the influence						the vehicle		104 Trees,						roperly cleaned v	windshie	ald
198 Other	oc or an	COTTO		known if d		ie the venic	ie	105 In-trans	ng load)	venicie				ed - no details		* .
100 00101					ribe below:					uction (descri	be below) .					•
999 Unknown								Unknown								
	Alcoh	ol Test Type Giv	ven	0	00 Ald	cohol Tes	t Result S	Status	970	Blood Alc	ohol Cor	ntent	Speedin	g Related		999
	000 No	test given				Results pe	nding		0.0				000 Not sp	eeding	L	3,000
		st refused				Results red							100 Racing			
Yes		ood test eath test				Not applica Unknown	ible							ded speed limit ast for conditions		
□No ·	CONTRACTOR OF THE	ine test			355	Officiowit							999 Unkno			
—	S. S. E. V. 200	her type of test								ľ						
✓ Unknown	_									Resul	t received fr	om				
		known if tested								70,000	253.00					
		Test Type Giver	1	000	-	est Resu		_		om Crime Lab						
		test given			_	ng/Negat				Jnknown	Citati	on#	13 13	Charge	S	41.
		st refused	*			0 Results n	-		Not applica	ble	1					
	101 Uri	ine test			L 10	0 Results p	ending	999 (Jnknown				I			
□No	12. (S.117) XV 1/A	th blood and urine te	sts		-			all that app					÷.			
Unknown	198 Ot	her type of test			_	0 Amphetar			Methamphe	etamines						8.20
. –	000 110	known if tested			_	1 Barbituate		207 (- 1076
	000 011	inionii ii tootoo			_	2 Benzodia		_	Oxycodone				1			
						3 Cannabin	oids	_	Propoxyphe				-		-	
						4 Cocaine	_	2101	Phencyclidi	ne (PCP)						
	250				_	5 Methador		danariha hale	hud				-		-	_
					LIZS	o Other pos	alive result (describe belo	ow)		1					
															7.5	
					DRIV	ER ACT	IONS A	T TIME (OF CRA	ASH						
Check all that apply:													7.0			
000 No contributing	action			1	₹ 999 U	nknown										
Disregarded Traffic				1,	nnronei	Maneuv	or			Ot	her Actio	ne				
100 Disregarded re		is or conduis				proper righ			727		1600 Imper		fic		_	
101 Disregarded ot		fic signal				proper left				_	601 Ran o	-				
102 Disregarded st		no digital			_	proper U-tu					602 Crow		7.3.1			
103 Disregarded yie						proper bac				-	603 Cross					
104 Disregarded oti	10.40 May 1					proper pas	Secretary Secretary			-	604 Faile			ay		
105 Disregarded ot					_	proper lane	1000			_	605 Faile					
106 Disregarded of				i	306 lm	properly pa	irked			× 0	606 Wron	g side o	froad			
Swerved or Avoide	d			Ir	nprone	Use of I	ights or S	Signals			607 Wron	g way				
200 Swerved or ave		ue to wind				riving withou			-	_	608 Follow		closely			
201 Swerved or av						ailed to dim				_	609 Cuttir					
202 Swerved or av					_		nproper sign	al		_	610 Over-		Carlo Contraction			
203 Swerved or av			roadway	e si		peration					980 Other	contribu	uting action	(describe below)	
204 Swerved or ave						eckless ope		4								
205 Swerved or ave					_	ggressive o		50								
								igent, or erra	tic operation	on						
							uence of alc		1							
							uence of dru									
		2 70 FE TO SEC. 102	201200			* **	B 41 HE		-		ODACH	SEDORT	DRIVER	CONDITION AND	CIDCUM	PTANCES

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ARKANSAS MOTOR VEHICLE CRASH REPORT NARRATIVE Crash Report # [18L011716

Page 11 of 12

Driver of V2, Tadlock, was southbound on SH 7 (Central Avenue) in the inside (left) lane approaching its intersection with Orange Street. Driver of V1, Shaw, was northbound on SH 7 (Central Avenue) and was attempting to turn left (West) onto Orange Street. V1 turned in front of V2. The front of V2 struck the rear
passenger (right) side of V1 just behind the rear tire.
,
CRASH DEPORT, MARRATIVE

	Case 6:18-cy-06062-P	KH Document 1	Filed 07/10/18	Page 21 of 23 Pag	geID #: 21 533464
Diagram pending investigation	Scene#	ARKANSAS MOTOR	VEHICLE CRASH I	REPORT	Page 12 of . 12
	1			Crash Report #	8L011716
	Diagram	pend	ing in	vestig	ation
		ě	ř.		
25/					6
			38.1		
CRASH REPORT - DIAG			54		CRASH REPORT - DIAGRAI

